

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		2-16-01
O.I.P.E. CLASSIFIER		59	3-15-01
FORMALITY REVIEW	EXC	106	3-19-01
RESPONSE FORMALITY REVIEW	M.H	625	05-27-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 : ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/26/01
2	3/26/01
3	3/26/01
4	3/26/01
5	3/26/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS 706